



TFW

1636

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/500,769

Filing Date

January 24, 2005

First Named Inventor

Pillarisetti, Sivaram

Art Unit

1636

Examiner Name

Not Yet Assigned

Attorney Docket Number

R18631 1070.2 (51880.0058.6)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Postcard
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="text"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Womble Carlyle Sandridge & Rice, PLLC		
Signature			
Printed name	Jeffery B. Arnold		
Date	October 31, 2005	Reg. No.	39,540

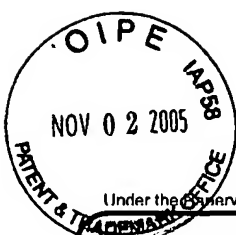
CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature			
Typed or printed name	Leslie N. Maisano	Date	October 31, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0

Complete if Known

Application Number	10/500,769
Filing Date	January 24, 2005
First Named Inventor	Pillarisetti, Sivaram
Examiner Name	Not Yet Assigned
Art Unit	1636
Attorney Docket No.	R18631 1070.2 (51880.0058.6)

METHOD OF PAYMENT (check all that apply)☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: Applied For Deposit Account Name: Womble Carlyle Sandridge & Rice, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below☐ Charge fee(s) indicated below, **except for the filing fee**☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
30	- 20 or HP = 0	x 0 = 0	

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
9	- 3 or HP = 0	x 0 = 0	

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)
0	0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
N/A	- 100 = N/A	/ 50 = N/A (round up to a whole number) x	0	0

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)
0

Other (e.g., late filing surcharge): Supplemental Information Disclosure Statement

0

SUBMITTED BY

Signature		Registration No. 39,540 (Attorney/Agent)	Telephone (404) 879-2433
Name (Print/Type)	Jeffery B. Arnold		Date October 31, 2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
)
PILLARISSETTI et al.) Art Unit: 1636
)
Serial No.: 10/500,769) Examiner: Not Yet Assigned
)
371(c) Date: January 24, 2005)
)
For: METHODS AND COMPOSITIONS)
FOR IDENTIFICATION AND)
THERAPEUTIC USE OF GENES)
INVOLVED IN VASCULAR AND)
PROLIFERATIVE DISEASES)

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner for Patents
Post Office Box 1450
Alexandria, Virginia 22313

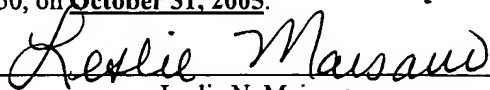
Sir:

This citation of information is made pursuant to 37 C.F.R. §§ 1.97 and 1.98. Applicants request that the Examiner review the below-listed U.S. Patent Document. The serial number of the below-listed U.S. patent application is listed on this form as provided in M.P.E.P. §609(D), rather than a PTO/SB/08A form, to avoid the serial number of the pending U.S. patent application being published on any patent that may issue from this application.

Applicants do not waive the confidential nature of the below-listed patent application:

-----U.S. Patent Application Serial No. 10/356,329, filed January 31, 2003 (now abandoned).

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class mail in an envelope with sufficient postage addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450, on **October 31, 2005**.


Leslie N. Maisano

SECOND SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

U.S. Serial No.: 10/500,769

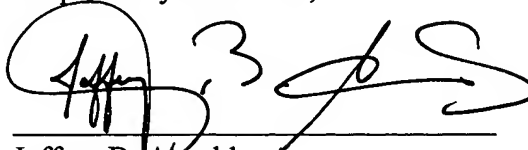
371(c) Filing Date: January 24, 2005

The Examiner is specifically requested not to rely solely on the information submitted herein. On the contrary, the Examiner is requested to conduct an independent and thorough review of the information, and to form independent opinions as to their significance.

The citation of this information does not constitute an admission that any of the materials are available as a reference or of priority, or a waiver of any right applicant may have under applicable statutes, Rules of Practice in patent cases, or otherwise.

Pursuant to 37 C.F.R. §1.97(b)(3), Applicants respectfully assert that no fee is due. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to deposit account no. 09-0528.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Jeffery B. Arnold', is written over a horizontal line.

Jeffery B. Arnold
Attorney for Applicant
Reg. No.: 39,540

Date: October 31, 2005

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Docket: R18631 1070.2 (51880.0058.6)